PATENT APPLICATION FEE DETERMINATION RECO									Application or Docket Num					
									09788059					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									LL ENTITY OTHER THA					ĺ
TOTAL CLAIMS			33					RAT	F	FEE	1 1	RATE	FEE	ł
FOR			· NUMBER FILED		NUMBER EXTRA			BASIC				BASIC FEE		ſ
TOTAL CHARGEABLE CLAIMS			33 minus 20=		. /3			X\$ 9)=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		. 0			X40			1	<u> </u>	234.0	r
MULTIPLE DEPENDENT CLAIM P			RESENT						_		OR	X80=		
. It	the difference	in column 1 is	less than ze	ero, ente	"0" in column 2			+135			OR	+270=	Oi .	
CLAIMS AS AMENDED - PART II										L	OR	TOTAL	944.	O
		(Column 1)	(Colur	nn 2)	(Column 3)		SMA		ENTITY	OR	OTHER SMALL			
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 33	Minus	. 3	33	= /		X\$ 9	=		ÓR	X\$18=	11.0	ı
	Independent	. 3	Minus	***	3	= /		X40:			00	X80=)	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									-	/	OR		/	
(+135= / TOTAL											OR	+270=/		
		20.1						ADDIT. F			OR :	FOTAL ADDIT FEE		
		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	1 .							
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	:	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 33	Minus	**	33	= /		X\$ 9:			OR	X\$18=	7.55	
AME	Independent	. 3	Minus	•••	3	= /	1	X40=	1			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	∧60		
						/	Į	+135			OR	+270=		
9-1-84 and and addit. FEE										OR ,	TOTAL ADDIT. FEE			
		(Column 1)	f	(Colun		(Column 3)								
AMENDMENT C	·- · · · · · ·	REMAINING AFTER AMENDMENT		NUME PREVIO	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL		RATE	ADDI- TIONAL	
NON	Total		Minus	<i>y</i>		9	lt	X\$ 9=	1	FEE		X\$18=	FEE	
ME	Independent		Minus	TY.			+	X40=	+		OR			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1		OR	X80=	·	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3										OR	+270=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											OR,	TOTAL ADDIT, FEE		
•	The "Highest Num	ber Previously Pai	d For (Total or	Independe	nt) is the	highest numbe	r foun	d in the	appr	opriate box				

FORM PTO-875 (Rev. 8/00)

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